DOCUMENT RESUME

ED 143 974 CG 011 779

TITLE	Psychology Problem Classification for Children and Youth.
INSTITUTION	Health Services Administration (DHEW/PHS), Rockville, Md. Bureau of Community Health Services.; Minnesota Systems Research, Inc., Washington, D.C.
REPORT NO	DHEW-HSA-77-5203
PUB DATE	76
GRANT	MC-R-270058
NOTE	55p.
EDRS PRICE	MF-$0.83 HC-$3.50 Plus Postage.
DESCRIPTORS	Behavior Problems; *Children; *Classification; Codification; Emotional Problems; Learning Difficulties; *Psychological Evaluation; Psychological Studies; *Psychologists; Special Health Problems; *Youth

ABSTRACT

The development of Psychology Problem Classification is an early step in the direction of providing a uniform nomenclature for classifying the needs and problems of children and youth. There are many potential uses for a diagnostic classification and coding system. The two most important uses for the practitioner are problem identification and monitoring for individual patients, and creation of an information base for developing program plans for intervention for a service population. With respect to the individual patient, the classification structure facilitates a more complete assessment because it suggests a wide spectrum of possible considerations, such as anticipatory guidance; illness management; physical, behavioral, emotional and learning problems, environmental and community effects; growth and development; stress and crisis management problems. With respect to the population needs, the incidence of specific problems can be determined in order to identify the frequency of prevailing problems, high risk groups in a given population, the direction of efforts by professionals in that field, and the contribution of psychology to the total care for the patient within that particular health care delivery setting. (Author)

****
* Documents acquired by ERIC include many informal unpublished *
* materials not available from other sources. ERIC makes every effort *
* to obtain the best copy available. Nevertheless, items of marginal *
* reproducibility are often encountered and this affects the quality *
* of the microfiche and hardcopy reproductions ERIC makes available *
* via the ERIC Document Reproduction Service (EDRS). EDRS is not *
* responsible for the quality of the original document. Reproductions *
* supplied by EDRS are the best that can be made from the original. *
****

ED143974

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

CG

PSYCHOLOGY PROBLEM CLASSIFICATION FOR CHILDREN AND YOUTH

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service
Health Services Administration
Bureau of Community Health Services

CG 011779

Developed under DHEW, Maternal and Child
Health Services Research Grant MC-R-270058
with Minnesota Systems Research, Inc.

PREFACE

The Children and Youth projects were established in 1965 to provide comprehensive health care to children of low-income families. Early in the development of these projects, it became apparent that health professionals, other than physicians and dentists, did not have a classification system for identifying and reporting patient problems. Supported by a Maternal and Child Health research grant, Minnesota Systems Research, Inc., has developed Problem Codes for Nursing, Social Work, Nutrition and Psychology. This work was accomplished with the assistance of professionals of these disciplines from project, Regional, and Central Office staff. The Problem Codes have been pilot tested and revised on the basis of comment from practitioners.

Major objectives of the Bureau of Community Health Services include the improvement of child health care in all delivery settings. To assist in implementing this objective, the Bureau of Community Health Services is disseminating these Problem Codes to providers in the field for [illegible]anded application. This problem classification system is a tool to be [illegible]ed in recording and identifying health problems presented to practitioners by their patients. It is a first step toward standardizing the diagnostic information used in deciding what care is needed and appropriate for individual and family health. Because of consistency in terminology, the use of the code can lead to improved record keeping and to improved communication between health professionals. Potentially, it can be used in aggregate form for program planning, determining provider effectiveness, resource allocation, and finally, for evaluation of various modes of health care delivery.

To be of value, the Problem Codes must be utilized by people who understand and appreciate its potential and its limitations in carrying out a specific activity. Regional workshops are being planned for consulting and practicing multidiscipline professionals on the use and benefits of the Problem Codes. We urge you to review this problem classification system and to utilize it where feasible.

We invite your critical comments.

Vince L. Hutchins, M.D.
Director
Division of Clinical Services
Bureau of Community Health Services
Health Services Administration
Department of Health, Education, and Welfare

TABLE OF CONTENTS

	Page
Introduction to Classification System	i
Purpose	ii
Utilization - Application	iii
Patient Care	iii
Planning	iii
Accountability	iv
Program Evaluation	iv
Research	iv
Instructions for Using Psychology Problem Codes	v
Rationale for Assigning Codes	v
Description of Problem Code by Position Digit	vi
Diagram of Major Psychology Categories	vii
First Position Digits	viii
Second Position Digits	viii
Third Position Digits	viii
Fourth Position Digits	viii
Areas of Special Note When Assigning Codes	ix
Coding of Well Child Status/Anticipatory Guidance	ix
Coding of Anticipatory Needs	ix
Problems of Family or Environment Affecting Child	ix
Distinction in Similar Nomenclature Used at Third and Fourth Digit Positions	ix
Followup Visits	x
Identification of Problems, Not Intervention Techniques	x
Case Examples and Application of Numerical Codes	xi
Conclusion	xii
PROBLEM CLASSIFICATION AND CODES	1
ALPHABETICAL INDEX	20

INTRODUCTION TO CLASSIFICATION SYSTEM OF PSYCHOLOGY PROBLEMS

This Psychology Problem Classification system is an initial effort to classify the results of the assessment function for psychologists. It was developed within the framework of a multi-disciplinary program for the delivery of child health services. The codes are intended to:

a) assist in identification of problems and to describe health status

b) make summarizations of problems and status easier for groups of served persons

c) be used in patient care planning, care evaluation audit and review, as well as to form a base for field research.

In 1965 the Federal government passed legislation requiring the delivery of comprehensive health care to children of low-income families through Children and Youth (C & Y) projects. This legislation required all projects to collect certain data about the population they served, the health problems they encountered, and the services they delivered. One class of required data items was the medical and dental conditions diagnosed. At that time a classification system for medical and dental diagnoses existed and was modified for C & Y project reporting. It soon became apparent, however, that other disciplines, including psychology, nutrition, social work and nursing might also benefit from the use of a classification system for identifying and reporting patient problems related to their areas of functioning.

The development of a nomenclature and classification system for psychology, nutrition, nursing and social work was begun and completed as a part of a grant which required the collection of uniform statistical data to be used in documenting the delivery of comprehensive health care to children and youth. Professionals from each of these four areas were selected to form task forces. Each of these task forces was to develop a system which would name and code the status of patients when assessed in each of their disciplines. At various stages in the development of these four pieces of work, the materials were tested by practitioners in differeing types of health care delivery settings. Based on the results of these trials, the materials were then revised.

In the context of this nomenclature and classification scheme, the term "problem" has been used to connote the status of a child who has been assessed by professionals in the psychology discipline and found to be "not well", i.e., an actual or anticipated dysfunction of the individual by psychological standards. It presumes that the systematic process of restoring and enhancing functioning, as well as preventing dysfunctioning within the framework of the psychological expertise, can best occur when an orderly identification of needs or problems are individually perceived and then documented for individuals or populations. The system classifies problems into six major groupings: 1) physical problems or long-term illness; 2) behavioral/emotional/learning problems; 3) the child's environment; 4) growth and development; 5) stress and transient situations; and 6) child rearing and home management. A seventh grouping is included which has a dual purpose; it provides a code which describes the child's state of health as "well" within the expertise of the psychology discipline, while also classifying anticipatory needs of children whose current state of health is either "well" or "not well".

As a discipline, psychology uses the concept of multiple causation of problems recognizing the bio/psycho/social nature of individuals. This classification system reflects that concept in its descriptive terms and structure. In so doing, it makes it possible for the user to identify clusters of functions and dysfunctions of individuals, and is also the first step in quantifying the areas of need and the gaps in service for groups.

This classification and coding system is, therefore, one element in defining the complete array of health problems which occur in a population. Although it offers a means of describing and documenting functioning and dysfunctioning, for each discipline area, it does <u>not</u> identify or prescribe methods of intervention.

PURPOSE

The development of the Psychology Problem Classification is an early step in the direction of providing a uniform nomenclature for classifying the needs and problems of children and youth. There are many potential uses for a diagnostic classification and coding system. The two most important

uses for the practitioner are a) problem identification and monitoring for individual patients and b) creation of an information base for developing program plans for intervention for a service population. With respect to the individual patient, the classification structure facilitates a more complete assessment because it suggests a wide spectrum of possible considerations such as: anticipatory guidance; illness management; physical, behavioral, emotional and learning problems, environmental and community effects; growth and development; stress and crisis management problems. With respect to the population needs, the incidence of specific problems can be determined in order to identify the frequency of prevailing problems, high risk groups in a given population, the direction of efforts by professionals in that field, and the contribution of psychology to the total care for the patient within that particular health care delivery setting.

UTILIZATION - APPLICATION

The use of the Psychology Problem Classification will suggest functions and applications for the future as data are generated by different health care sites and practitioners. Included below are selected potential uses and applications of the diagnostic classification and codes.

Patient Care

By using the classification and codes a more complete and explicit identification and definition of the problem or problems of the individual patient can be made. This should result in specific, tailor-made care plans for each person. This system can also be used as the basis for a relatively simple monitoring mechanism to track each individual in terms of their problems and care plan and thus check on the effectiveness of the planned intervention.

Planning

In order to decide on a plan - who is to do what; with, by, to and for whom; at what time; in what place; by what methods; using what resources; in what sequence; for what intended outcome - one must begin with an identification and definition of the problem. This coding and classification can serve as that initial step in planning for an individual or for a program.

By summarizing data collected on the nature and extent of psychological problems one can identify unmet needs, gaps in services, and priorities for program planning. The periodic review of the data will make it possible to shift program priorities as intervention affects previously identified problems.

This classification and coding system also enables interdisciplinary problem identification and planning in a team setting. This is followed by determining what team member is responsible for intervention, thereby eliminating a duplication of unnecessary patient and staff interaction.

Accountability

Use of the coding system provides the opportunity for the practitioner to describe psychological problems in a uniform manner and thus assemble data which can identify unmet needs or gaps in service for the individual or populations being served. Comparison of problems over time, across disciplines and health care settings, as well as by region, age, sex and ethnic group will provide an extensive data base useful to practitioners and health planners. The data will also help health care professionals see the magnitude of existing problems, give order to priorities for service, and show manpower needs internally to their program planners as well as externally to legislators, budget administrators, third party payors and other individuals whose decisions affect the existence and scope of health care delivery systems.

Program Evaluation

The codes will provide the data base and (if used in monitoring care plans) the outcomes for evaluating the efficiency and/or effectiveness of both intervention and prevention programs.

Research

The data base provided by the diagnostic codes is potentially the required resource for research to investigate relationships between psychological problems and other health problems; between problems and types of intervention; and between problems and outcomes.

INSTRUCTIONS FOR USING PSYCHOLOGY PROBLEM CODES

RATIONALE FOR ASSIGNING CODES

The diagnostic codes have been designed as a four digit categorization system. Separate numerical codes have been developed on the basis of frequency of occurrence, importance and preciseness of characterization of the condition or problem. In addition to the tabular numerical code listing there is an alphabetical index of the conditions/problems with their corresponding numerical code.

Prior to assigning a numerical code, the alphabetical listing should be consulted to locate the correct problem descriptor and corresponding numerical code. It is possible that a particular descriptor or descriptive phrase may have more than one alternative numerical code reflecting psychological problems or status. When more than one code is possible for one problem the level of preciseness or focus from the assessment will determine which code to use.

It is important to note that this classification system is a compromise: a composite index which will not meet all specialized needs. It is also important to realize that the degree of standardization is often erratic in terms of: 1) the focus of psychological practice across various health care settings; 2) the assessment/workup process from one practitioner to another in the same discipline and/or; 3) the description of psychological functioning or dysfunctioning from one psychologist to another even within the same setting. It is hoped, however, that this endeavor will improve standardization in these areas (when possible) and provide at least a common basis of nomenclature and classification of problems. By summary tabulation it can also document the degree of functioning or dysfunctioning which exists in a population of children and youth.

The degree of completeness of recording identified problems for each child depends upon the use to be made of such information:

1. INDIVIDUAL PROBLEMS OR STATUS

   If the coded information is to be used to indicate intended resolution of the problem or other status, the practitioner would code only those problems which he/she expects to affect or resolve or the status he/she expects to maintain.

2. INCIDENCE OF PROBLEMS

   If the coded information is to be used to indicate the rate at which problems are newly arising in a program or community, the practitioner would only need to code an individual's problems/needs which fit the targeted objectives of the practitioners and/or program (and summarize them).

3. PREVALENCE OF PROBLEMS

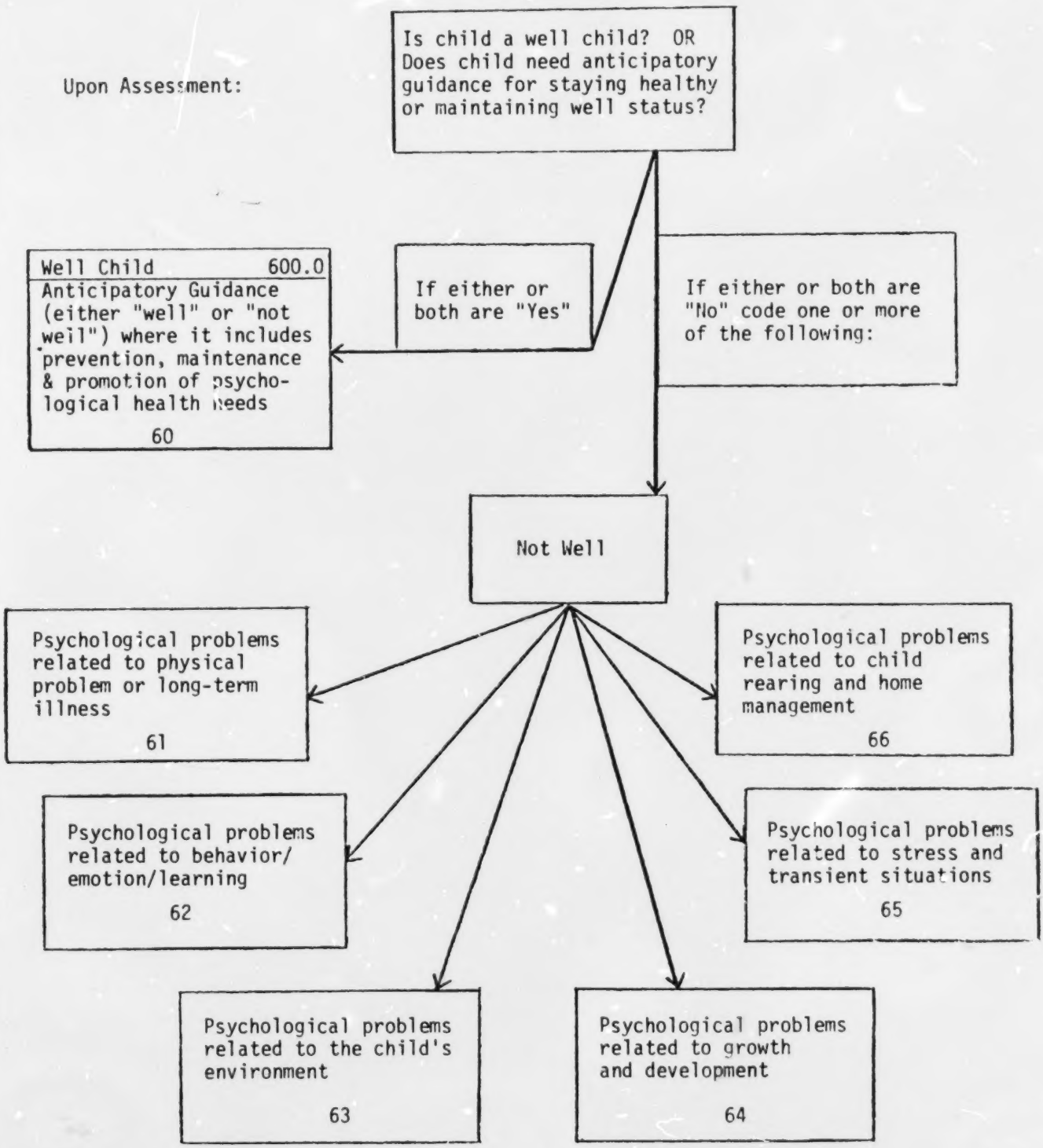
   If the coded information is to be used to indicate the rate at which problems exist in the community, the practitioner would need to list and code all problems identified for each child (the child's general health status) so that they can be summarized for the service area.

In all cases, it should be emphasized that the codes are to be used to document problems and needs of children and youth and not intervention techniques/methods. These problems are identified specifically in the psychologist's area of functioning, and are usually not the same as the medical diagnoses, although they are often related. Furthermore, the nomenclature and classification scheme is designed to be patient specific, and is not designed to describe specifically the family situation, other family members or other external forces or conditions except as the codes specify them to be a factor or an impingement upon the functioning or dysfunctioning of the particular child being assessed.

DESCRIPTION OF PROBLEM CODE BY POSITION DIGIT

The following diagram represents the major categories of problems which form the basis of the classification scheme for psychology.

PSYCHOLOGY CODES: MAJOR CATEGORIES


Upon Assessment:
Is child a well child? OR Does child need anticipatory guidance for staying healthy or maintaining well status?
If either or both are "Yes"
If either or both are "No" code one or more of the following:
Well Child 600.0
Anticipatory Guidance (either "well" or "not well") where it includes prevention, maintenance & promotion of psychological health needs
60
Not Well
Psychological problems related to physical problem or long-term illness
61
Psychological problems related to child rearing and home management
66
Psychological problems related to behavior/ emotion/learning
62
Psychological problems related to stress and transient situations
65
Psychological problems related to the child's environment
63
Psychological problems related to growth and development
64

First Position Digit Identifies the Discipline or Functional Area

3 - Nursing

4 - Nutrition

5 - Social Work

6 - PSYCHOLOGY

Second Position Digit Identifies the Major Categories (see diagram)

60 - Well child; anticipatory guidance for "well" and "not well" children, i.e., prevention, maintenance and promotion of psychological health needs.

61 - Psychological problems related to physical problem or long-term illness.

62 - Behavioral/emotional/learning problems of the child affecting psychological status.

63 - Environmental problems affecting psychological status.

64 - Psychological problems related to overt problems due to temporary deviations from normal growth and development.

65 - Psychological management problems related to stress and transient situations (short-term).

66 - Child rearing and home management problems affecting psychological status.

Third Position Digit Identifies the Problem More Specifically

The third position digits _ _ 0 to _ _ 9 in the code structure identify more specifically the psychological problems in each of the major categories. The third digit, _ _9, has been designated "Other" and is to be used consistently for the few of a kind problems, not otherwise specified. The recorder should always state the problem when this third digit _ _9 - Other is used. Users may wish to designate a separate code for a certain "other" problem group if that problem exists in their setting in sufficient numbers.

Fourth Position Digit Identifies the Problem by Name or Very Specifically

The fourth position digits _ _ _.0 to _ _ _.9 in the code structure identify by name the exact problem assessed in the psychological area. The fourth digit, _ _ _.9, has been designated "Other" and is to be used consistently for the few of a kind problems, not otherwise specified. The recorder should always name the problem when this fourth digit _ _ _.9 - Other is used.

AREAS OF SPECIAL NOTE WHEN ASSIGNING CODES

Coding of Well Child Status/Anticipatory Guidance

Category 60 - includes a code for the well child who at the present time has no needs other than routine health promotion counseling - 600.0. If, however, the psychologist judges that the well child has a specific area of potential need, a code from 601 - 609 should be assigned which will specify that particular anticipated psychological need. When there are areas of anticipatory guidance covered routinely, as part of the overall psychology program, it is not necessary to code this routine. Only when the psychologist has particular concern or sees a special anticipatory guidance need does a specific code need to be assigned to the well child.

Coding of Anticipatory Needs

In addition to applying the anticipatory guidance codes in 601 - 609 to a well child status, these codes may also be used in association with illness conditions or problems of not well children (610 - 699). If a child has a problem and needs related anticipatory counseling, code the problem(s) and also code any anticipatory or supportive counseling need(s).

Problems of Family or Environment Affecting Child

As has been stated, this nomenclature and classification system is based on patient specific assessment and is limited to problems of a child and youth population. It includes sections for coding the child's community or household environment, as well as cultural and family practices which appear to impinge directly on the child's psychological status. However, these codes are not intended to describe fully the status or problems of those other persons or situations.

Distinction in Similar Nomenclature Used at Third and Fourth Digit Positions

In some cases the same or similar phrases are used to code conditions at both the third digit level and fourth digit level. The assignment of the appropriate code is dependent on the depth and thoroughness of the assessment/workup process,

as well as the role and focus of the psychology program and practitioner. It may not be possible for the assessment/workup to be sufficiently in-depth to name the specific condition. At that time a third level code should be used. The completeness with which the practitioner is able to define and describe the patient's overall psychological status may therefore, dictate the level of code which can be assigned.

Followup Visits

When patients return for a followup visit for a previously identified problem, the recording system to which this coding applies must include some mechanism to assure that it is a revisit and not a new condition. Although the followup mechanism should be documented as part of a summary data system, it is beyond the scope of this tool. Comment is included here to be certain that multiple recording and reporting of the same condition does not occur in the uses for planning or estimating prevalence or incidence.

Identification of Problems, Not Intervention Techniques

In utilizing this classification system, it is important to remember that the results of the assessment of a situation which exists or potentially exists as a problem or need is what is being classified, not an intervention technique or method. As a result of the assessment/workup process, one or more short descriptive statements or phrases are written which summarize the findings of that process, i.e., problems are described or "wellness" is documented and numerical codes are assigned to these statements. Following this assessment a plan of care should be developed which will include methods or techniques of intervention or treatment to resolve the problems or maintain the "wellness". It is not possible to classify these intervention techniques or methods using these codes as presently developed, although this system would form the basic data set for any subsequent monitoring of intervention or evaluation of outcomes.

CASE EXAMPLES AND APPLICATION OF NUMERICAL CODES

Case #1: John is a ten year old boy who appears normal physically, has an average IQ, but is always restless and not able to sit still at school long enough to get anything done. His teacher referred him to a psychologist. Problem Code: 643.0

6	4	3 . 0
Designates PSYCHOLOGY as area identifying the problem	Designates major problem as PSYCHOLOGICAL PROBLEMS RELATED TO GROWTH AND DEVELOPMENT	Designates specific problem as MOTOR DISTURBANCES WITH PSYCHOLOGICAL COMPLICATIONS

Name of problem is HYPERKINESIS

Case #2: Mary is a fourteen year old girl who is very shy. She stays home most of the time, doesn't have any friends, always asks her mother if she is doing things right and never does anything without asking permission. Her mother took her to a psychologist. Problem Code: 626.4

6	2	6 . 4
Designates PSYCHOLOGY as area identifying problem	Designates major problem as PROBLEMS RELATED TO BEHAVIOR/ EMOTIONAL/ LEARNING	Designates specific problem as EMOTIONALLY INSECURE

Name of problem is PROFOUND NEED TO BE DEPENDENT

Case #3: Sally is a seven year old. She will not go to sleep unless a light is on, will not walk into a house when it is dark, and will not go outside at night. Her mother took her to a psychologist. Problem Code: 671.4

6	7	1 . 4	
Designates PSYCHOLOGY as area identifying problem	Designates major problem as PSYCHO-PATHOLOGICAL BEHAVIORS	Designates specific problem as PSYCHOPATHOLOGICAL ASSOCIATED WITH EMOTIONAL FUNCTIONS: FEAR PHOBIA	Name of problem is SPECIFIC PHOBIC RESPONSE TO THE DARK

CONCLUSION

As with most developmental endeavors of this type, no amount of testing, revising and thought can create a product that does not need to be updated, changed and/or expanded to meet future needs. In any profession, areas of expertise, interest and focus change over time.

There are one-thousand codes available in this particular scheme. By adding another digit greater specificity could be accomplished. However, far less than the one-thousand possibilities are currently utilized. Within this schema, expansion could be made for more preciseness, for specialized areas of psychological care, or for inclusion of other age groups.

6-- PSYCHOLOGY PROBLEM CLASSIFICATION

60- ANTICIPATORY GUIDANCE FOR "WELL" AND "NOT WELL" CHILDREN

- 600 Well child, only routine anticipatory guidance needed, no specific problems
- 601 Need for knowledge and guidance in managing chronic illness
- 602 Need for knowledge and guidance of cognitive/intellectual inadequacy
- 603 Need for knowledge and guidance of environmental influences on child
- 604 Need for knowledge and guidance in area of growth and development
- 605 Need for knowledge and guidance in area of stress or transient episodes
- 606 Need for knowledge and guidance in area of child rearing and home management
- 607 Need for knowledge and guidance in area of emotional problems
- 608 Need for knowledge and guidance in area of personality disorder(s)
- 609 Other

61- PSYCHOLOGICAL PROBLEMS RELATED TO PHYSICAL PROBLEMS OR LONG-TERM ILLNESS

- 610 Psychophysiological disorders
  - 610.0 Skin reaction
  - 610.1 Musculoskeletal reaction
  - 610.2 Respiratory reaction
  - 610.3 Cardiovascular reaction
  - 610.4 Hemic and lymphatic reaction
  - 610.5 Gastrointestinal reaction
  - 610.6 Genito-urinary reaction
  - 610.7 Endocrine reaction
  - 610.8 Reaction of organs of special sense
  - 610.9 Nervous system disorder

611 Medical problems

611.0 Accident
611.1 Acute poisoning (excluding lead poisoning)
611.2 Surgical procedures
611.3 Multiple surgical procedures
611.4 Neoplasms
611.5 Lead poisoning
611.6 Infection - venereal
611.7 Infection - serum hepatitis
611.8
611.9 Other

612 Seizure disorders

612.0 Febrile
612.1 Intracranial infections
612.2 Intracranial trauma or hemorrhage
612.3 Toxic (e.g., lead, Kernicterus) anoxia, metabolic
612.4 Other acute disorders
612.5 Idiopathic (includes grand mal, petit mal, psychomotor, focal, myoclonic, akinetic)
612.6 Organic
612.7 Epilepsy simulating states
612.8 Hypoglycemic states
612.9 Other chronic or recurrent disorders (including migraine, syncopal attacks, etc.)

613 Cerebral dysfunction (perinatal)

613.0 Congenital cranial defects
613.1 Congenital spinal cord lesions
613.2 Cerebral damage (e.g., hyperbilirubinemia, prematurity)
613.3 Birth injury
613.4 Anoxia
613.5 Infections
613.6
613.7
613.8
613.9 Other

614 Congenital Neurological Defects

614.0 Increased intracranial pressure (e.g., tumor, abscess, effusion, herniation)
614.1 Hydrocephalus
614.2 Infections (meningitis, encephalitis)
614.3 Toxic reactions (include drugs, lead, etc.)
614.4 Degenerative disorders
614.5 Cranio-cerebral and spinal trauma
614.6 Diseases of the spinal cord
614.7 Diseases of the autonomic nervous system
614.8 Neuritis and neuropathies
614.9 Other (include cerebella ataxia, opasmus nutans, minimal brain damage, etc.)

615 Genetic disorders with psychological complications

615.0 Sickle cell anemia
615.1 Cystic fibrosis
615.2 Diabetes
615.3 PKU
615.4 Down's syndrome
615.5 Chromosomal abnormalities - other than Down's syndrome
615.6
615.7
615.8
615.9 Other

616 Organic brain damage (acquired)

616.0 Brain insult (traumatic)
616.1 Cerebral palsy
616.2 Brain damage - post meningitis
616.3 Brain damage - post encephalitis
616.4 Brain damage - post other neurological disease
616.5 Brain tumor
616.6
616.7
616.8
616.9 Other

617 Currently unused, open for future use and expansion

617.0
617.1
617.2
617.3
617.4
617.5
617.6
617.7
617.8
617.9

618 Currently unused, open for future use and expansion

618.0
618.1
618.2
618.3
618.4
618.5
618.6
618.7
618.8
618.9

619 Currently unused, open for future use and expansion

619.0
619.1
619.2
619.3
619.4
619.5
619.6
619.7
619.8
619.9

62- PROBLEMS RELATED TO BEHAVIORAL/EMOTIONAL/LEARNING

620 Antisocial behavior

620.0 Fire setting
620.1 Lying - excessive
620.2 Stealing
620.3 Destructive behavior - property
620.4 Physical attack
620.5 Sadistic behavior (e.g., animals, other children)
620.6 Runaway/school truancy
620.7 Drug abuse/addiction
620.8 Alcohol abuse/addiction
620.9 Antisocial behavior - other

621 Sexual disturbances

621.0 Exhibitionism (excessive)
621.1 Fetishism
621.2 Homosexuality
621.3 Rape
621.4 Sexual promiscuity
621.5 Voyeurism
621.6 Bestiality
621.7 Bisexuality
621.8 Transvestism
621.9 Masturbation (excessive)

622 Psychomotor disturbances

622.0 Head banging
622.1 Head or body rocking/whirling
622.2 Tic-isolated movements
622.3 Tic-generalized
622.4 Twitch (e.g., involving shoulder girdle, total body, etc.)
622.5 Finger sucking
622.6 Picking behavior
622.7 Pulling behavior
622.8 Habit disturbances
622.9 Other

623 Passivity

623.0 Unable to express aggressive feeling
623.1 Lets others dominate
623.2 Inhibitions leads to psychoneurotic and psychosomatic difficulties
623.3 Phobias, anxiety, reactions, tics
623.4 Uncomfortable in atmosphere of anger
623.5 Feels self assertion would bring punishment
623.6 Imbued with guilt from relation with parents
623.7 Fears loss of love if expresses anger
623.8 Depression
623.9 Other

624 Agressiveness

624.0 Reacts to frustration with aggression
624.1 Temper tantrums
624.2 Angry defiance
624.3 Rebellious against authority
624.4 Quarrelsome
624.5 Has known too few or too many limits
624.6 Has known conflictual demands between parents
624.7 Has lacked parental love
624.8 Yearning for love lies beneath aggression
624.9 Other

625 Compulsivity

625.0 Preoccupied with orderliness, cleanliness, conscientiousness
625.1 Tense - hard working
625.2 Conscientious but lacks warmth in relationships
625.3 Idleness creates feelings of guilt
625.4 Scrupulously moral
625.5 Intimate relationships difficult
625.6 Frugal with money - a hoarder
625.7 Cold and hostile towards parents
625.8 Orderly things substituted for personal relations
625.9 Over conforming

626 Emotionally insecure

626.0 Feelings of inadequacy
626.1 Lack of self-confidence
626.2 Unstable
626.3 Poor judgement in interpersonal relations
626.4 Profound need to be dependent
626.5 Wants to be sheltered, lead, others to take responsibility
626.6 Not dependable under stress
626.7 Plays with younger children
626.8 Attention-seeking behavior
626.9 Cannot compete

627 Intellectual capacity

627.0 Dull normal
627.1 Mentally retarded, borderline defective
627.2 Educable mentally retarded
627.3 Trainable mentally retarded
627.4 Custodial mentally retarded
627.5 Vegetative
627.6 Special learning disabilities
627.7 Slow learner
627.8 Gifted
627.9 Other

628 Psycho-educational problems

628.0 Reading problems
628.1 Arithmetic problems
628.2 Distractibility
628.3 Language disorder
628.4 Poor retention/assimilation
628.5 Under achievement
628.6 Over achievement
628.7 Psychomotor disturbances
628.8 Learning disability
628.0 Other

629 Cognitive disorders

629.0 Abstract reasoning
629.1 Concept formation (thinking, reasoning)
629.2 Discrimination
629.3 Perceptual (visual, auditory)
629.4 Inability to express oneself in writing
629.5 Comprehension/association
629.6 Learning disability
629.7
629.8
629.9 Other

63- PSYCHOLOGICAL PROBLEMS RELATING TO THE CHILD'S ENVIRONMENT

630 Cultural dissimilarity

630.0 Cultural
630.1 Language
630.2 Economic
630.3 Racial
630.4 Rural/urban
630.5 Religious
630.6 Family education
630.7 Family standards or value system
630.8 Parent occupations
630.9 Other

631 Physical dissimilarity

631.0 Age
631.1 Size
631.2 Color
631.3 Distinguishing characteristics
631.4 Physical abnormalities
631.5 Acceptability
631.6 Dress
631.7 Grooming
631.8 Cleanliness - hygiene
631.9 Other

632 Social differences

632.0 Economic
632.1 Housing units
632.2 Political
632.3 Peer culture
632.4 Dissimilarities in material possessions
632.5 Patterns of permissiveness and restriction
632.6 Differences in vocational levels
632.7 Social class differences
632.8 Religious
632.9 Other

633 Educational system inadequacies

633.0 Lack of appropriate programs
633.1 Inappropriate behavioral management
633.2 Inadequate instructor(s)
633.3 Lack of facilities
633.4 Deficiency in instructional programs
633.5
633.6
633.7
633.8
633.9 Other

634 Currently unused, open for future use and expansion

634.0
634.1
634.2
634.3
634.4
634.5
634.6
634.7
634.8
634.9

635 Currently unused, open for future use and expansion

635.0
635.1
635.2
635.3
635.4
635.5
635.6
635.7
635.8
635.9

636 Currently unused, open for future use and expansion

636.0
636.1
636.2
636.3
636.4
636.5
636.6
636.7
636.8
636.9

637 Currently unused, open for future use and expansion

637.0
637.1
637.2
637.3
637.4
637.5
637.6
637.7
637.8
637.9

638 Currently unused, open for future use and expansion

638.0
638.1
638.2
638.3
638.4
638.5
638.6
638.7
638.8
638.9

639 Currently unused, open for future use and expansion

639.0
639.1
639.2
639.3
639.4
639.5
639.6
639.7
639.8
639.9

64- PSYCHOLOGICAL PROBLEMS RELATED TO GROWTH AND DEVELOPMENT

640 Inadequate physical development

640.0 Failure to thrive
640.1 Delayed gross motor development, awkward, not well coordinated
640.2 Delayed fine motor development - difficulty in manual eating, writing
640.3 Delay in general milestones - sucking, sitting, walking
640.4 Delay in cognitive development - talking, imitating
640.5 Delay in physical growth - height, weight
640.6 Delay in toilet training
640.7
640.8
640.9 Other

641 Inadequate social development

641.0 Lack of response to physical nurturing
641.1 Failure to respond to social stimuli
641.2 Delay in toilet training
641.3 Delay in socialization
641.4 Failure to form close interpersonal relationships
641.5 Inadequate parent-child relationship
641.6 Prefers objects and animals to people
641.7 Inability to share
641.8
641.9 Other

642 Disorders of speech, hearing and language with psychological complications

642.0 Mutism
642.1 Deafness
642.2 Stuttering
642.3 Articulation problems - other (lisp)
642.4 Difficulties in speech rhythm
642.5 Difficulties in phonation
642.6 Difficulties in expressive language
642.7 Difficulties in receptive language
642.8 Reliance on non-verbal communication
642.9 Speech delay

643 Motor disturbances with psychological complications

643.0 Hyperkinesis
643.1 Hypokinesis
643.2 Coordination difficulties - gross
643.3 Coordination difficulties - fine
643.4 Intension tremors
643.5 Faulty directionality
643.6
643.7
643.8
643.9 Other

644 Currently unused, open for future use and expansion

644.0
644.1
644.2
644.3
644.4
644.5
644.6
644.7
644.8
644.9

645 Currently unused, open for future use and expansion

645.0
645.1
645.2
645.3
645.4
645.5
645.6
645.7
645.8
645.9

646 Currently unused, open for future use and expansion

646.0
646.1
646.2
646.3
646.4
646.5
646.6
646.7
646.8
646.9

647 Currently unused, open for future use and expansion

647.0
647.1
647.2
647.3
647.4
647.5
647.6
647.7
647.8
647.9

648 Currently unused, open for future use and expansion

648.0
648.1
648.2
648.3
648.4
648.5
648.6
648.7
648.8
648.9

649 Currently unused, open for future use and expansion

649.0
649.1
649.2
649.3
649.4
649.5
649.6
649.7
649.8
649.9

65- PSYCHOLOGICAL PROBLEMS RELATED TO STRESS AND TRANSIENT SITUATIONS

650 Hostile feelings expressed in anti-social acts

650.0 Running away as an adventure
650.1 Result of disagreement with parents
650.2 Driving car without license
650.3 Hitchhiking
650.4 Defiance of parent
650.5 Vengefulness toward parent
650.6 As response to erratic discipline
650.7 Retaliation for rejection
650.8
650.9 Other

651 Conditions requiring adjustment - infancy

- 651.0 Separation
- 651.1 Medical/surgical procedures
- 651.2 Hospitalization
- 651.3 Weaning
- 651.4 Toilet training
- 651.5 Physical restriction (excluding abuse)
- 651.6 Parental disharmony
- 651.7 Disaster
- 651.8 Death of loved one
- 651.9 Other

652 Conditions requiring adjustment - childhood (1 through 11 years)

- 652.0 Separation
- 652.1 Hospitalization
- 652.2 Medical/surgical care
- 652.3 Physical illness, injury, accident (excluding abuse)
- 652.4 Relation with parent or foster parent
- 652.5 Disharmony between parents
- 652.6 Environmental stresses
- 652.7 Death of a loved one, disaster
- 652.8 Peer group pressures
- 652.9 Other

653 Conditions requiring adjustment - adolescence (12 through 20 years)

- 653.0 Separation
- 653.1 Disturbed relation to opposite sex
- 653.2 Resistance to standards of home
- 653.3 Desires freedom without responsibility
- 653.4 Hospitalization
- 653.5 Medical/surgical procedures
- 653.6 Physical (illness-injury, accident) (excluding abuse)
- 653.7 Peer group pressures
- 653.8 Necessity to relinguish immediate satisfaction for remote ones
- 653.9 Death of a loved one, disaster

654 Imbalance of two-parent biological family

- 654.0 Father abuse
- 654.1 Reaction to step-parent
- 654.2 Temporary removal from home
- 654.3 Reaction to marital stress of parents
- 654.4 Foster care - reaction to new caretakers
- 654.5 Mother abuse
- 654.6 Reaction to alcoholic parent
- 654.7
- 654.8
- 654.9 Other

655 Currently unused, open for future use and expansion

655.0
655.1
655.2
655.3
655.4
655.5
655.6
655.7
655.8
655.9

656 Currently unused, open for future use and expansion

656.0
656.1
656.2
656.3
656.4
656.5
656.6
656.7
656.8
656.9

567 Currently unused, open for future use and expansion

657.0
657.1
657.2
657.3
657.4
657.5
657.6
657.7
657.8
657.9

658 Currently unused, open for future use and expansion

658.0
658.1
658.2
658.3
658.4
658.5
658.6
658.7
658.8
658.9

659 Currently unused, open for future use and expansion

659.0
659.1
659.2
659.3
659.4
659.5
659.6
659.7
659.8
659.9

66- PSYCHOLOGICAL PROBLEMS RELATED TO CHILD REARING AND HOME MANAGEMENT

660 Child rearing and home management, first year

660.0 Complete dependency in first year
660.1 Not relaxed if not well mothered
660.2 Uncomfortable, colicky
660.3 Does not sleep well
660.4 Fitful, irritable
660.5 Cries excessively
660.6 Reflects insecurity of mother
660.7 Does not eat well
660.8 Not easily weaned
660.9 Other

661 Child rearing and home management, ages 2 through 3

661.0 Toilet training resisted
661.1 Wishes to continue to be fed
661.2 Defiant of parental requests
661.3 Refuses to consider others
661.4 Social withdrawal
661.5 Refuses to abide by limitations regarding things and behavior harmful to him
661.6 Rivalrous with siblings as result of unequal love, erratic limitations, disproportionate liberties
661.7 Masturbates, plays with genitals
661.8 Temper tantrums
661.9 Breath holding

662 Child rearing and home management, ages 4 through 7

662.0 Has not learned to share possessions
662.1 Does not wish to share mother with father or siblings
662.2 Rivalry for parental attention
662.3 Jealousy
662.4 Fighting and quarreling with siblings
662.5 Resistance to going to bed
662.6 Nightmares
662.7 Curiosity regarding sex
662.8 Refuses limitations regarding T.V.
662.9 Other

663 Child rearing and home management beyond age 7

663.0 Choice of friends
663.1 Withdrawal from peers
663.2 Resistance to companionship with parents
663.3 Resists chores and responsibilities of the home
663.4 Restless sleep
663.5 Personal hygiene
663.6 Defiance of parents
663.7
663.8
663.9 Other

664 Child rearing and home management of puberty and adolescence

664.0 Not adjusting to rapid physical growth
664.1 Not adjusting to sexual maturation
664.2 Distrusts adequacy of sex organs
664.3 Resistant to emotional independence
664.4 Resistant to social independence
664.5 Resistant to economic independence
664.6 Secretive regarding spending
664.7 Exaggerated self-confidence - excessive need for reassurance
664.8 Too intense an attachment to opposite sex
664.9 Needs restriction and privilege, freedom and responsibility

665 Home management of sexuality of adolescent

665.0 Masturbation
665.1 Inability to form lasting relationship with opposite sex
665.2 Illicit relationships - promiscuity
655.3 Homosexuality
665.4 Transvestism
665.5 Transsexuality
665.6 Perversions
665.7 Prostitution
665.8
665.9 Other

666 Inadequate child rearing techniques

666.0 Excessive physical punishment
666.1 Inconsistent limits
666.2 Excessive limits
666.3 Conditional acceptance
666.4 Unrealistic expectations
666.5 Excessive fostering of dependency
666.6 Lack of parental respect for self or child
666.7 Authoritative domination
666.8 Negative approach in making requests
666.9 Child not permitted to learn through consequences of own choices

667 Child abuse (physical or emotional)

667.0 Skeletal
667.1 Organ - internal
667.2 Organ - external
667.3 Skin and subcutaneous tissue
667.4 Central nervous system
667.5 Verbal aggression
667.6 Authoritative domination
667.7
667.8
667.9 Other

668 Child neglect (physical and emotional)

668.0 Shelter
668.1 Food
668.2 Clothing
668.3 Medical attention
668.4 Educational
668.5 Supervision
668.6 Parent absence or desertion
668.7 Parent lack of concern
668.8 Verbal or physical isolation
668.9 Emotional isolation

669 Currently unused, open for future use and expansion

669.0
669.1
669.2
669.3
669.4
669.5
669.6
669.7
669.8
669.9

67- PSYCHOPATHOGICAL BEHAVIORS

670 Psychopathology associated with emotional functioning: manifest anxiety

670.0 Apprehensive behavior
670.1 Free floating anxiety - chronic
670.2 Anxiety attack
670.3 Panic state
670.4 Separation anxiety
670.5 Stranger anxiety
670.6 Uncontrollable crying - screeming
670.7
670.8
670.9

671 Psychopathology associated with emotional functioning: fear-phobia

671.0 Chronic fearfulness (generalized)
671.1 Specific fears (nonsituational)
671.2 Specific fears: phobic reaction - generalized
671.3 Specific phobic response to school
671.4 Specific phobic response to the dark
671.5 Specific phobic response to animals
671.6 Specific phobic response to heights - acrophobia
671.7 Specific phobic response to enclosed places
671.8 Specific phobic response to physical environment (storms, lightening, wind, etc.)
671.8 other

672 Psychopathology associated with emotional functioning: disturbances of mood

672.0 Acute depression
672.1 Chronic depression
672.2 Self-depreciation - suicidal thoughts
672.3 Self-depreciation - sucidial gestures
672.4 Self-depreciation - sucidial attempts
672.5 Euphoric or related behavior
672.6 Mood inappropriate or opposite to situation
672.7 Silliness with uncontrollable laughter - giggling
672.8
672.9 Other manifestations of mood disturbances

673 Psychopathology associated with bodily functions: eating

673.0 Anorexia nervosa
673.1 Obesity
673.2 Food refusal
673.3 Food fads
673.4 Food rituals
673.5 Over eating
673.6 Rumination (regurgitation)
673.7 Pica
673.8 Feeding difficulties (e.g., sucking, weaning)
673.9 Eating difficulties - other

674 Psychopathology associated with bodily functions: sleeping

674.0 Difficulties in falling to sleep
674.1 Excessive sleppiness
674.2 Fitful sleeping
674.3 Insomnia
674.4 Nightmares
674.5 Night terrors
674.6 Talking in sleep
674.7 Somnambulism
674.8 Unwillingness to sleep alone
674.9 Sleeping difficulties - other

675 Psychopathology associated with bodily functions: bowel function

675.0 Encopresis - chronic
675.1 Encopresis - episodic or regressive
675.2 Constipation
675.3 Withholding stools
675.4 Diarrhea
675.5 Toilet rituals
675.6 Excessive flatulence
675.7 Resistance to training
675.8 Corprophagia
675.9 Bowel function difficulties - other

676 Psychopathology associated with bodily functions: bladder function

676.0 Nocturnal enuresis - chronic
676.1 Nocturnal enuresis - episodic or regressive
676.2 Enuresis diurnal
676.3 Resistance to training
676.4 Urinary frequency
676.5 Urinary retention
676.6 Urinary urgency
676.7 Toilet rituals
676.8
676.9 Bladder function difficulties - other

677 Emotional disorders/withdrawal states - infancy

677.0 No differentiation between self and infantile non-self
677.1 Rigid when held, resistive to mother
677.2 No appropriate response to external stimuli
677.3 Symbiotic fusion (with mother)
677.4 Unoriented - detached
677.5 Delayed motor activity
677.6 Use of mother as extension of self
677.7
677.8
677.9 Other - autism, infantile

678 Emotional states/withdrawal/childhood

678.0 Apathetic, disinterested, frequently no responding to sound
678.1 Inability to relate to people-disturbed communication
678.2 Bizarre eating, sleeping and eliminative patterns
678.3 Rocking, head banging, twirling, ritualistic activity
678.4 Obsessive preoccupation with sameness
678.5 Obsessive preoccupation with body functions
678.6 Little learning - extinguished quickly
678.7 Hallucinations and delusions
678.8 Massive denial - autistic withdrawal
678.9 Other

679 Emotional states/withdrawal/adolescence

679.0 Faulty identification - personal, sexual
679.1 Intensified ambivalence
679.2 Massive denial - autistic withdrawal
679.3 Inappropriate affect
679.4 Bizarre symbolic behavior, ritualism
679.5 Self accusation and guilt, suicidal attempt and gestures, chronic depression, self destruction, loss of self-esteem
679.6 Delusions and hallucinations
679.7 Hostility and aggression
679.8 Extreme vulnerability
679.9 Poor social competence
Deteriorated mental motor and expressive skills
Depression and suicide

68-

Currently unused, open for future use and expansion

69-

PSYCHOLOGY ALPHABETICAL LISTING

- A -

Abnormalities, congenital
- CNS ..... see 614
- genetic ..... see 615
- organic brain damage ..... see 616
- perinatal ..... see 613

Absence
- father 654.0
- mother 654.5

Abscess 614.0
Abstract reasoning 629.0
Abulia
- emotionally insecure ..... see 626
- passivity ..... see 623

Abuse, child ..... see 667
Acceptability 631.5
Accident
- adolescent 653.6
- childhood 652.3
- medical problem 611.0

Achievement - under 628.5
Acne ..... see 610
Acousma
- emotional state/adolescence 679.6
- emotional state/childhood 678.7

Acromicria (mongolism) 615.4
Acrophobia 671.6
Acting out
- aggressiveness ..... see 624
- antisocial ..... see 620
- hostile feelings ..... see 650

Acute poisoning (excluding lead poisoning) 611.1
Addison's disease 611.7
Adjustment reaction
- adolescence ..... see 653
- childhood ..... see 652
- infancy ..... see 651

Adiadochokinesis, organic brain damage ..... see 616
Aerophagia, psychomotor disturbances 622.9
Affect - disorder
- adolescence ..... see 679
- childhood ..... see 678
- infantile ..... see 677

Affect - displacement 654.2
Affect - flat
- adolescence 679.3
- childhood 678.0
- infancy 677.4

Affect - inappropriate
- adolescence 679.3
- childhood ..... see 678
- infancy 677.2

Age 631.0

Aggressive behavior
- aggressiveness ..... see 624
- antisocial behavior ..... see 620
- childrearing age
  - 2-3 years 661.6
  - 4-7 years 622.4
- emotional state/adolescence 679.7

Agraphia 629.4

Akinetic 612.5

Alcohol, addition/abuse 620.8

Alcoholic parent 654.6

Allergy
- psychophysiological 610.0
- respiratory 610.2

Amaurotic idiocy, genetic 615.5

Ambivalence, adolescents 679.1

Amblyophia 610.8

Anemia, hemic disorder 610.4

Angry defiance 624.2

Anorexia nervosa, bodily function - eating 673.0

Anoxia
- cerebral dysfunction 613.4
- seizure disorder 612.3

Antisocial behavior ..... see 620
- emotional state/adolescence ..... see 679
- sexual ..... see 621
- stress/transient ..... see 650

Anxiety
- acute attacks 670.2
- free floating 670.1
- panic 670.3
- separation 670.4
- stranger 670.5

Apathy
- disturbances of mood 672.6
- emotional state/childhood 678.0

Aphasia 642.6

Apraxia
- disorder of speech 642.3
- special sense disorder 610.8

Articulation problems 642.3

Arithmetic problems 628.1

Assimilation, poor 628.4

Association/comprehension 629.5

Associated movements, motor disturbances ..... see 643

Astasia abasia 610.9

Asthma 610.2

Astigmatism (congenital or acquired) 610.8

Ataxia
  cerebella ataxia 614.9
  motor disturbances 643.3
Athetosis 610.9
Attention
  memory 628.2, 628.4
  seeking behavior 626.8
Auditory 629.3
Authority (rebellion against) ..... see 624
Authoritative domination 667.6
Autism
  adolescence 679.2
  childhood 678.8
  infancy 667.9
Automatic nervous system disease 614.7
Avoidance reaction, emotionally insecure ..... see 626
Awkward 640.1

- B -

Behavior disorder
  aggressiveness ..... see 624
  antisocial behavior ..... see 620
  passivity ..... see 623
Bestiality 621.6
Bisexuality 621.7
Birth injury 613.3
Bizarre behavior
  adolescence 679.4
  childhood ..... see 678
Blindness 610.8
Bodily function psychopathology
  bowel ..... see 675
  eating ..... see 673
  sleeping ..... see 674
Borderline defective 627.1
Brain damage
  congenital neurological defects 614.9
  minimal 614.9
  organic brain damage (acquired) ..... see 616
  other neurological disease 616.4
  perinatal cerebral ..... see 613
  post encephalitis 616.3
  post meningitis 616.2
Brain insult 616.0
Brain tumor 616.5
Breath holding
  childrearing 622.9
  home management 661.9

- C -

Cardiovascular reaction 610.3
Cerebral
  damage 613.2
  dysfunction (perinatal) ..... see 613
  palsy 661.1
Cerebella ataxia 614.9
Character disorder ..... see 620
Childrearing
  well child/need for knowledge ..... see 606
    1 year ..... see 660
    2-3 years ..... see 661
    4-7 years ..... see 662
    beyond 7 years ..... see 663
    inadequate techniques ..... see 666
    puberty and adolescence ..... see 664
    sexuality of adolescence ..... see 665
Chromosomal abnormalities 615.5
Cleanliness 625.0
Cleanliness/hygiene
  beyond age 7 ..... 663.5
  physical dissimilarity 631.8
Chronic illness management, well child/need for knowledge .. see 601
Cognitive disorders
  development (delay) 640.4
  intellectual capacity ..... see 627
  psycho-educational problems ..... see 628
Clothing 668.2
Colic 660.2
Color 631.2
Comprehension/association 629.5
Compulsivity ..... see 625
Concept formation 629.1
Conflict
  adolescence ..... see 653
  childhood ..... see 652
  manifest anxiety ..... see 670
Conflictual demands between parents 624.6
Congenital
  cranial defects 613.0
  neurological defects ..... see 614
  spinal cord lesians 613.1
Conscientiousness 625.0
Constipation 675.2
Convulsive disorder ..... see 612
Coordination
  fine motor disturbances 643.3
  gross motor disturbances 643.2
  inadequate physical development 640.1
  psychomotor disturbances ..... see 622, 628.6
Corprolalia 621.9
Corprophgia 675.8
Cranial defects 613.0
Cranial cerebral trauma 614.5
Cretinism 614.9

Crying
childrearing 660.5
manifest anxiety 670.6
Cultural dissimilarity
cultural 630.0
economic 630.2
family education 630.6
family value system 630.7
language 630.1
parent occupations 630.8
racial 630.3
religious 630.5
rural/urban 630.4
Custodial, mentally retarded 627.4
Cyclothymia 626.2
Cystic fibrosis 615.1

- D -

Deafness 642.1
special sense disorder 610.8
Death of loved one
adolescence 653.9
childhood 652.7
infancy 651.8
Decompensation
adolescence ..... see 679
childhood ..... see 678
Defiance
agressiveness 624.2
childrearing/home management beyond age 7 ..... 663.6
stress/transient 650.4
Degenerative disorders 614.4
Delinquency
antisocial behavior ..... see 620
homemanagement/adolescent sexuality ..... see 655
sexual disturbances ..... see 621
stress/transient ..... see 650
Delusion
adolescent 679.6
childhood 678.7
Denial, massive
adolescence 679.2
childhood 678.8
Dependent, profound need for 626.4
Depersonalization ..... see 679
Depression
disturbance of mood (acute & chronic) 672.0, 672.1
emotional state/adolescence 679.5
passivity ..... see 623
Deprivation ..... see 668
Dermititis 610.0
Destructive behavior
antisocial behavior (property) 620.3
emotional state
adolescence ..... see 679
childhood ..... see 678

Detachment, emotional state/infancy 677.4
Developmental delay
  physical ..... see 640
  social ..... see 641
Diabetes 615.2
Diarrhea
  bodily functional psychopathology 675.2
  gastro-intestinal disorder 610.5
Diplegia 610.9
Directionality, faulty 643.5
Disaster
  adjustment reaction
    adolescent 653.9
    childhood 652.9
    infancy 651.7
Discipline, erratic 650.6
Discrimination 629.2
Disorders of speech, hearing and language
  articulation problems (lisp) 642.3
  deafness 642.1
  mutism 642.0
  phonation 642.5
  receptive language 642.7
  reliance on non-verbal communication 642.8
  speech delay 642.9
  speech rhythm 642.4
  stuttering 642.2
Dissimilarity
  cultural ..... see 630
  physical ..... see 631
  social ..... see 632
Distractibility 628.2
  hyperkinesis 643.0
Down's Syndrome 615.4
Dress 631.6
Driving car without license 650.2
Drug abuse/addiction 620.7
  congenital neurological defects 614.3
Dull normal 627.0
Dysarthria
  disorder of speech 642.3
  nervous system disorder 610.9
Dyslexia
  cognitive disorders ..... see 629
  minimal brain damage 614.9
Dysmenorrhea 610.6
Dyssocial
  antisocial ..... see 620
  home management/adolescent ..... see 664
  stress/transient episode ..... see 650

- E -

Eating disorders
  adjustment reactions/infancy 651.3
  childrearing
    1 year 660.7
    2-3 years 661.1
  child neglect 668.1
  emotional state/childhood 678.2
  psychopathology ..... see 673
Educational system inadequacies ..... see 633
Economic
  cultural 630.2
  social 632.0
Educable, mentally retarded 627.2
Effusion 614.0
Emotional states
  adolescence ..... see 679
  childhood ..... see 678
  infancy ..... see 677
  insecure ..... see 626
Encephalitis
  congenital neurological defects 614.2
  organic damage 616.3
Encopresis
  chronic 675.0
  episodic or regressive 675.1
Endocrine reaction 610.7
Enuresis
  diurnal 676.2
  nocturnal
    chronic 676.0
    episodic or regressive 676.1
Environmental
  cultural ..... see 630
  social ..... see 632
  stress 652.6
Epileptiform states 612.7
Epilepsy ..... see 612
Euphoria 672.5
Exhibitionism 621.0

- F -

Failure to thrive
  inadequate physical development 640.0
  inadequate social development 641.1
Family disturbance
  childhood 652.5
  infancy 651.6
Family education 630.6
Family standards/value system 630.7
Fantasy
  adolescence ..... see 679
  childhood ..... see 678

Father absence 654.0
Fear
chronic generalized 671.0
fear-phobia ..... see 671
non-situational 671.1
phobic reaction, generalized 671.2
Febrile illness 612.0
Feeding problem
1 year 660.7
2-3 years 661.1
inadequate physical development 641.0
infancy 651.3
Fetishism 621.1
Fighting, excessive
age 4-7 ..... 662.4
aggressiveness ..... see 624
antisocial behavior 620.4
emotional state/adolescence 679.7
stress/transient ..... see 650
Fine motor development 640.2, 643.3
Finger sucking 622.5
Fire setting 620.0
Flatulence 675.6
Focal 612.5
Food fads 673.3
Food refusal 673.2
Foster care (new caretaker) 654.4
Froehlich's syndrome 610.7
Frugal with money 625.6

- G -

Gastrointestinal reaction 610.5
Genetic disorders with psychological complications ..... see 615
Gifted 627.8
Genito-urinary reaction 610.6
Grandiose delusions
adolescence 679.6
childhood 678.7
Grand mal 612.5
Grooming 631.8
Gross motor development delayed 640.1, 643.3
Growth - delayed ..... see 640
well child/anticipated needs ..... see 604
Guilt
emotional state/adolescence 679.5
passivity 623.6

- H -

Habit disturbance 622.8
Hallucination
adolescence 679.6
childhood 678.7
Hardworking 625.1

Head banging 622.0
Hearing loss 610.8
Heart disease 610.3
Hebephrenia ..... see 679
Height 640.7
Hemic disorder
  psychophysiologic 610.4
  sickle cell anemia 615.0
Hemiplegia 610.9
Hepatitis, serum 611.7
Herniation 614.0
Hitchhiking 650.3
Homesickness
  adolescent 653.0
  childhood 652.0
Home management/childrearing
  1 year ..... see 660
  2-3 years ..... see 661
  4-7 years ..... see 662
  beyond 7 years ..... see 663
  puberty and adolescence ..... see 664
  sexuality of adolescents ..... see 665
Homosexuality 621.2
  adolescent 665.3
Hospitalization
  adolescence 653.5
  childhood 652.1
  infancy 651.2
Hostility
  aggressiveness ..... see 624
  anti-social acts 650.1
  compulsivity 625.7
  emotional state 679.7
Housing units ..... see 632.1
Huntington's chorea 615.5
Hydrocephalus 614.1
Hygiene cleanliness
  beyond age 7 ..... 663.6
  physical dissimilarity 631.8
Hyperbilirubinemia 613.2
Hyperkinesis 643.0
Hypertension 610.3
Hypokinesis 643.1
Hypoglycemia states 612.8
Hypothyrodism 610.7

Idiopathetic 612.5
Illicit behavior, promiscuity 665.2
Illness
adolescent 653.6
childhood 652.3
Imitating 640.4
Impotence, feelings of 664.2
Impulsivity 620.9
Inadequate development
physical ..... see 640
social ..... see 641
Inadequacy, feelings of 626.0
Incest 621.9
Incontinence, urinary
genito-urinary 610.6
psychopathology 676.9
Increased intra-cranial pressure 614.0
Independence 664.3
Infection
cerebral dysfunction 613.5
congenital neurological defects 614.2
intracranial 612.1
serum hepatitis 611.7
veneral disease 611.6
Inferiority, feelings of
emotionally insecure 626.1
passivity ..... see 623
Inhabition 623.2
Injury, birth
adolescent 653.6
childhood 652.3
perinatal cerebral dysfunction 613.3
Insecurity, feelings of
childrearing (1 year) 660.6
emotionally insecure 626.8
manifest anxiety ..... see 670
passivity ..... see 623
Insomnia 674.3
Instability, child
emotional states ..... see 678
emotionally insecure ..... see 626
Inegration, cognitive ..... see 629
Intellectual capacity ..... see 627
Intension tremor
motor disturbances 643.4
seizure disorder 612.9

Interpersonal relationships
adjustment
adolescence ..... see 679
childhood 652.8
aggressiveness 624
anti-social behavior ..... see 620
compulsivity ..... see 625
emotional state
adolescence ..... see 679
childhood ..... see 678
emotionally insecure ..... see 626
home management ..... see 660, 661, 662, 663, 664, 665
inadequate social development ..... see 641
passivity ..... see 623
poor judgement 626.3
Intracranial
infection 612.1
pressure 614.0
trauma 612.2
Irritability - childrearing (1 year) 660.4

- J -

Jacksonian epilepsy ..... see 612
Jealousy 662.3
Judgement - poor ..... see 620

- K -

Kernicterus 612.3
Kleptomania 620.2

- L -

Lability ..... see 626
Lag - see Develoment
Language
cultural dissimilarity 630.1
disorder 628.3
expressive 642.6
receptive 642.7
Lead
congenital neurological defects 614.3
Lead poisoning 611.5
Learning disability
cognitive disorder 629.6
psycho-educational problems 628.8
Lisp 642.3
Locomotion - see Motor
Love
childrearing 666.6
lack of parental 624.7
yearning for 624.8

Lying (excessive) 620.1
Lymphatic reaction 610.4

- M -

Macroencephaly 614.9
Mania ..... see 672
Manic depressive ..... see 672
Manual eating 640.2
Marital difficulty
childhood 652.5
infancy 651.6
stress, reaction 654.3
Masturbation
childrearing/home management 661.7, 665.0
sexual disturbances 621.9
Medical problems ..... see 611
Medical procedures
adjustment
adolescence 653.5
childhood 652.2
infancy 651.1
multiple surgical 612.3
surgical 612.2
Melancholia ..... see 672
Memory, disorder
cognitive 629.5
psycho-educational problem 628.4
Meningitis
infections 614.2
organic (acquired) brain damage 616.2
Mentally retarded
custodial 627.4
educable 627.2
trainable 627.3
Metabolic 612.2
Microcephaly 614.9
Migraine 612.9
Minimal brain damage 614.9
Mood disorder ..... see 672
Moral, excessively 625.4
Motor development
disturbances with psychological complications ..... see 643
multiple-surgical 611.3
physical ..... see 640
procedures 611.3
Musculoskeletal reaction 610.1
Mutism 642.0
Mycionic 612.5
Myopia 610.8

- N -

Nail biting 622.9
Narcolepsy 674.9
Narcotic: see Drug
Nausea 610.5
Neglect, child ..... see 668
Neoplasm 611.4
Nervous system disorder
  central nervous system defects ..... see 614
  perinatal cerebral dysfunction ..... see 613
  psychophysiologic 610.9
  seizure ..... see 612
Neuritis 614.8
Neurological defects ..... see 614
Neuropathies 614.8
Nightmares
  childrearing (4-7 years) 662.6
  psychopathology of sleeping 674.4
Night terrors 674.5
Non-verbal communication 642.8
Nutans 614.9
Nystagmus
  emotional state/childhood 678.4, 678.5
  nervous system disorders 610.9
  special sense disorders 610.8

- O -

Obesity 673.1
Occupations, parent 630.8
Opasmus 614.9
Orderliness 625.0
Organic 612.6
Organic brain damage (acquired) ..... see 616
Over achievement 628.6
Over conforming 625.9
Over eating, psychopathology associated with bodily functions 673.5

- P -

PKU 615.3
Panic 670.3
Paranoia ..... see 679
Paraplegia 610.9
Parent occupations 630.8
Parental conflict 624.6
Parental disharmony
  childhood 652.5
  infancy 651.6
Passivity ..... see 623

Peer culture 632.3
Perceptual disorder 629.3
Perceptual motor disorder 628.8
Permissiveness 632.5
Personality disorder
- aggressiveness ..... see 625
- anti-social ..... see 620
- compulsivity ..... see 625
- emotionally insecure ..... see 626
- passivity ..... see 623
- psychomotor ..... see 622
- sexual ..... see 621

Perversion
- management/adolescence 665.6
- sexual psychopathology ..... see 626

Petit mal 612.5
Phenylkentonuria 615.3
Phobia
- animals 671.5
- dark 671.4
- emotional functioning ..... see 671
- enclosed places 671.7
- generalized 671.2
- heights 671.6
- other phobic responses 671.9
- physical environment 671.8
- school 671.3

Phonation 642.5
Physical
- abnormalities 631.4
- attack 620.4
- development, inadequate ..... see 640
- dissimilarity ..... see 631
- restriction 651.5

Pica 673.7
Picking behavior 622.6
Poisoning
- acute 611.1
- lead 611.5

Political differences 632.2
Preoccupation 625.0
Prematurity 613.2
Promiscuity 665.2
Prostitution 665.7
Psychoeducational problems ..... see 628

Psychological behaviors (see 670)
- bladder ..... see 676
- bowel ..... see 675
- eating ..... see 673
- fear phobia ..... see 671
- manifest anxiety ..... see 670
- mood disturbance ..... see 672
- sleeping ..... see 674

Psychomotor disturbances ..... 612.5, 628.7 see 622
Psychophysiologic disorders ..... see 610
Psychosis
- adolescence ..... see 679
- childhood ..... see 678
- infantile ..... see 677

Psychosomatic disorders ..... see 610
Pulling behavior 622.7

- Q -

Quadriplegia 610.9
Quarrelsome
- aggressiveness 624.4
- childrearing (4-7 years) 662.4

- R -

Racial dissimilarity
- cultural 630.3
- physical 631.2

Rape 621.3
Reaction of organs of special sense 610.8
Reading problems 628.0
Reality, loss
- adolescence ..... see 679
- childhood ..... see 678

Reasoning 629.1
Rebelliousness
- aggressiveness 624.3
- childrearing
  - 2-3 years ..... see 661
  - 4-7 years ..... see 662
  - beyond 7 years ..... see 663
- stress/transient ..... see 650

Rejection
- child neglect ..... see 668
- stress/transient 650.7

Religious dissimilarity
- cultural 630.5
- social 632.8

Removal from home, temporary 654.2

Resistant
chores/responsibilities (beyond 7 years) 663.3
companionship with parents (beyond 7 years) 663.2
economic independence 664.5
emotional independence 664.3
going to bed (4-7 years) 662.5
standards of home 653.2
social independence 664.4
toilet training (2-3 years) 661.0
Respiratory reaction 610.2
Retention, poor 628.4
Restriction 632.5
Retardation - see Intellectual capacity
Rigidity 677.1
Ritualistic behavior
compulsivity 625.8
emotional state/childhood 678.3
Rocking, head or body 678.3
Rumination (regurgitation) 673.6
Runaway
antisocial behavior 620.6
stress/transient 650.0
Rural 630.4

- S -

• Sadistic behavior 620.5
Schizophrenia
adolescence ..... see 679
childhood ..... see 678
infancy ..... see 677
School truancy 620.6
Seizure disorders ..... see 612
Self confidence, lack of 626.1
Self concept
emotionally insecure 626.1
management/adolescence ..... see 664
Self-depreciation
attempts 672.4
gestures 672.3
thoughts 672.2
Separation anxiety, adjustment
adolescence 653.0
childhood 652.0
infancy 651.0
manifest 670.4
Sexual curiosity, childrearing (4-7 years) 662.7
Sexual deviation
behavior ..... see 621
management adolescence 665.6
Sexual disturbance
behavior ..... see 621
childrearing
adolescence ..... see 665
puberty ..... see 664

Sexual identification 679.0
Sexual promiscuity 621.4
childrearing/adolescence 665.2
Shelter 668.0
Sibling rivalry
2-3 years 661.6
4-7 years 662.4
Sickle cell anemia 615.0
Sitting 640.3
Situation reaction: see Adjustment reaction or stress/ transient episode
Size 631.1
Skin disorder 610.0
Sleep disturbance
childrearing
1 year 660.3
4-7 years 662.5
beyond 7 years 663.4
difficulties in falling asleep 674.0
excessive sleepiness 674.1
fitful sleeping 674.2
talking in sleep 674.6
unwillingness to sleep alone 674.8
Slow learning 627.7
Special sense organ disorder 610.8
Social competence, poor ..... see 641
Social development
delay in ..... see 641
emotionally insecure ..... see 626
emotional state/adolescence 679.9
Social differences ..... see 632
Social withdrawal
2-3 years 661.4
beyond 7 years 663.1
Sociopathic personality ..... see 620
Somnambulism 674.7
Special learning disabilities 627.6
Speech disturbances
expressive language 642.6
nonverbal communication 642.8
phonation 642.5
receptive language 642.7
speech rhythm 642.4
Spelling deficit ..... see 628
Spinal cord
diseases 614.6
lesion 613.1
Spinal trauma 614.5
Step parent 654.1
Stimulus deprivation, child neglect ..... see 668
Stress, environmental 652.6
Stress/transient episodes ..... see 650
well child/anticipated needs ..... see 605
Stuttering 642.2
Sucking 640.3

Suicidal
- attempts 672.5
- gestures 672.4
- thoughts 672.3

Surgical procedures 611.2
Superior functioning 627.8
Symbiosis 677.3
Syncopal attacks 613.9

- T -

Talking 640.4
Temper tantrum
- aggressiveness 624.1
- childrearing (2-3 years) 661.8

Tension, chronic 625.1
Thinking 629.1
Tic
- generalized 622.3
- isolated movement 622.2

Timidity
- emotionally insecure ..... see 626
- passivity ..... see 623

Toilet training
- adjustment/infancy 651.4
- childrearing (2-3 years) 661.0
- inadequate physical development 640.6
- inadequate social development 641.3
- psychopathology
  - bowel ..... see 675
  - bladder ..... see 676

Toxic
- congenital neurological defects 614.3
- seizure disorders 612.3

Trainable, mentally retarded 627.3
Transvestism
- management/adolescence 665.4
- sexual distrubances 621.8

Transsexuality 665.5
Trauma 616.0
Tremor, intention 643.4
Truancy 624.6
Tumor 614.0
Twitch 622.4

- U -

Undependable under stress 626.6
Underachievement 628.5
Unstable 626.2
Urban 630.4
Urinary
- frequency 676.4
- retention 676.5
- urgency 676.6

- V -

Vandalism ..... see 620
Vegetative 627.5
Venereal disease 611.6
Vengefulness 650.5
Visual
  disorder 610.8
  perceptual 629.3
Value system 630.7
Vocational levels, parental 632.6
Voyeurism 621.5
Vulnerability 679.8

- W -

Walking, delay in 640.3
Weaning
  adjustment/infancy 651.3
  childrearing (1 year) 660.8
  difficulties 673.8
Weight 640.7
Well child ..... see 600
Whirling, head or body 622.1
Writing 640.2

* U. S. GOVERNMENT PRINTING OFFICE : 1976 O - 241-189 (355)